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**\*BIBDATASHEET\*****CONFIRMATION NO. 3090**

Bib Data Sheet

|                             |                                       |              |                        |                                        |
|-----------------------------|---------------------------------------|--------------|------------------------|----------------------------------------|
| SERIAL NUMBER<br>10/647,930 | FILING DATE<br>08/26/2003<br><br>RULE | CLASS<br>446 | GROUP ART UNIT<br>3712 | ATTORNEY<br>DOCKET NO.<br>4004004.0031 |
|-----------------------------|---------------------------------------|--------------|------------------------|----------------------------------------|

## APPLICANTS

Steven Davis, Scapoose, OR;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 09/819,189 03/28/2001 PAT 6,688,936  
 and claims benefit of 60/453,283 03/11/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 05/20/2004

|                                                                                                                                           |                                   |                        |                       |                            |
|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no                                           | STATE OR<br>COUNTRY<br>OR         | SHEETS<br>DRAWING<br>8 | TOTAL<br>CLAIMS<br>13 | INDEPENDENT<br>CLAIMS<br>4 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after |                                   |                        |                       |                            |
| Verified and<br>Acknowledged                                                                                                              | Allowance<br>Examiner's Signature | Initials               |                       |                            |

## ADDRESS

34755

ADAM K. SACHAROFF

MUCH SHELIST FREED DENENBERG AMENT&amp;RUBENSTEIN,PC

191 N. WACKER DRIVE

SUITE 1800

CHICAGO , IL

60606-1615

## TITLE

Ornamental design for a flying toy

|            |                                            |                                                                |
|------------|--------------------------------------------|----------------------------------------------------------------|
| FILING FEE | FEES: Authority has been given in Paper    | <input type="checkbox"/> All Fees                              |
| RECEIVED   | No. _____ to charge/credit DEPOSIT ACCOUNT | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
| 782        | No. _____ for following:                   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|            |                                            | <input type="checkbox"/> 1.18 Fees ( Issue )                   |



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CONFIRMATION NO. 3090

|                                                                                                                                                                                                                               |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <b>SERIAL NUMBER</b><br>10/647,930                                                                                                                                                                                            | <b>FILING OR 371(c)<br/>DATE</b><br>08/26/2003<br><b>RULE</b>                                                     | <b>CLASS</b><br>446                | <b>GROUP ART UNIT</b><br>3712                                                                                                                                                                                                                                                      | <b>ATTORNEY<br/>DOCKET NO.</b><br>4004004.0031 |
| <b>APPLICANTS</b><br>Steven Davis, Scapoose, OR;                                                                                                                                                                              |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>** CONTINUING DATA *****</b><br>This application is a CIP of 09/819,189 03/28/2001 PAT 6,688,936<br>and claims benefit of 60/453,283 03/11/2003                                                                            |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>** FOREIGN APPLICATIONS *****</b>                                                                                                                                                                                          |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **</b><br>** 05/20/2004                                                                                                                                         |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance |                                                                                                                   | <b>STATE OR<br/>COUNTRY<br/>OR</b> | <b>SHEETS<br/>DRAWING</b><br>8                                                                                                                                                                                                                                                     | <b>TOTAL<br/>CLAIMS</b><br>13                  |
| Verified and<br>Acknowledged <u>Examiner's Signature</u> <u>Initials</u>                                                                                                                                                      |                                                                                                                   | <b>INDEPENDENT<br/>CLAIMS</b><br>4 |                                                                                                                                                                                                                                                                                    |                                                |
| <b>ADDRESS</b><br>34755                                                                                                                                                                                                       |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>TITLE</b><br>Ornamental design for a flying toy                                                                                                                                                                            |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>FILING FEE<br/>RECEIVED</b><br>482                                                                                                                                                                                         | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                                |

*Davis case in o.t.l.*  
DERRIS H. BANKS  
SUPERVISORY PATENT EXAMINER  
TECHNOLOGY CENTER 3700